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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>  <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>		<b>Attorney Docket No.</b> 144273IT (MHM 15333US01)	
		<b>First Inventor</b> Fors	
		<b>Title</b> Input Device for an Information System	
		<b>Express Mail Label No.</b> EV 435 261 325 US	

  

<b>APPLICATION ELEMENTS</b> <i>See MPEP chapter 600 concerning utility patent application contents.</i>	<b>ADDRESS TO:</b> Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
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1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i> 2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification [Total Pages <u>21</u> ] <i>(preferred arrangement set forth below)</i> -Descriptive title of the invention -Cross Reference to Related Applications -Statement Regarding Fed sponsored R&D -Reference to sequence listing, a table, or a computer program listing appendix -Background of the Invention -Brief Description of the Drawings (if filed) -Detailed Description -Claim(s) -Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <u>4</u> ] 5. Oath or Declaration [Total Sheets <u>3</u> ] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i> i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper c. <input type="checkbox"/> Statements verifying identity of above copies <b>ACCOMPANYING APPLICATION PARTS</b> 9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & documents(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i> 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input type="checkbox"/> Other: _____
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18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: \_\_\_\_\_

Prior application information: Examiner: \_\_\_\_\_ Art Unit: \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

  

**19. CORRESPONDENCE ADDRESS**

<input checked="" type="checkbox"/> Customer Number: <span style="border: 1px solid black; padding: 2px 10px;">23446</span>		OR <input type="checkbox"/> Correspondence address below	
Name			
Address			
City	State	Zip Code	
Country	Telephone	Fax	
Name (Print/type) Joseph M. Butscher		Registration No. (Attorney/Agent) 48,326	
Signature		Date March 12, 2004	



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23026 U.S. PTO

PTO/SB/17 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<b>FEE TRANSMITTAL for FY 2004</b>  Patent Fees are subject to annual revision.		<b>Complete if Known</b>	
		Application Number	
		Filing Date	March 12, 2004
		First Named Inventor	Fors
		Examiner Name	
		Group Art Unit	
TOTAL AMOUNT OF PAYMENT	(\$986	Attorney Docket No.	144273IT (MHM 15333US01)

<b>METHOD OF PAYMENT</b>		<b>FEE CALCULATION (continued)</b>																																																																																																																																																																																											
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:  Deposit Account Number: 50-2401 Deposit Account Name: GEMS <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		<b>3. ADDITIONAL FEES</b>																																																																																																																																																																																											
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<b>SUBMITTED BY</b>		<b>Complete (if applicable)</b>			
Name (Print/Type)	Joseph M Butscher	Registration No. (Attorney or Agent)	48,326	Telephone	312-775-8000
Signature		Date	March 12, 2004		

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